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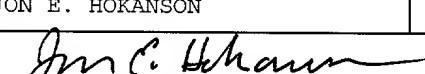
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 UTILITY PATENT APPLICATION TRANSMITTAL <i>(only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	5589-1045
	First Inventor	LOI HAN
	Title	SCANNER PROJECTION SYSTEM
	Express Mail Label No. EL 380507772 US	

JC715 12/07/08 JC784 12/07/08

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231												
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 42] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 16]</p> <p>5. Oath or Declaration [Total Pages 3]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 17 completed)</i></p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 09 436,712 Prior application information: Examiner Cheukfan Lee Group / Art Unit: 2722 436,712 12/716</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>														
ACCOMPANYING APPLICATION PARTS <table border="0"> <tr> <td>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</td> <td rowspan="2"><input type="checkbox"/> Power of Attorney</td> </tr> <tr> <td>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement</td> </tr> <tr> <td>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></td> <td rowspan="2"><input type="checkbox"/> Copies of IDS Citations</td> </tr> <tr> <td>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449</td> </tr> <tr> <td>13. <input type="checkbox"/> Preliminary Amendment</td> <td rowspan="3"><input type="checkbox"/> Other: Certificate of Mailing by Express Mail; Associate Power of Attorney</td> </tr> <tr> <td>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></td> </tr> <tr> <td>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></td> </tr> <tr> <td>16. <input checked="" type="checkbox"/> Other: _____</td> </tr> </table>				9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	<input type="checkbox"/> Power of Attorney	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement	11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	<input type="checkbox"/> Copies of IDS Citations	12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	13. <input type="checkbox"/> Preliminary Amendment	<input type="checkbox"/> Other: Certificate of Mailing by Express Mail; Associate Power of Attorney	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	16. <input checked="" type="checkbox"/> Other: _____
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16. <input checked="" type="checkbox"/> Other: _____														

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label		<i>(Insert Customer No. or Attach bar code label here)</i>			or <input checked="" type="checkbox"/> Correspondence address below	
Name	JON E. HOKANSON					
Address	SMALL LARKIN, LLP 10940 Wilshire Boulevard, 18th Floor					
City	Los Angeles	State	CA	Zip Code	90024	
Country	US	Telephone	310-209-4499		Fax	310-209-4450
Name (Print/Type)	JON E. HOKANSON		Registration No. (Attorney/Agent)			30,069
Signature				Date 12-7-08		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 750.00)

Complete if Known

Application Number	To be assigned
Filing Date	To be assigned
First Named Inventor	Loi Han
Examiner Name	Cheukfan Lee [expected]
Group Art Unit	2722 [expected]
Attorney Docket No.	5589-1045

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to

Deposit Account Number **19-2500**
 Deposit Account Name **Small Larkin, LLP**

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 Surcharge - late filing fee or oath	
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 Non-English specification	
147	2,520	147 2,520 For filing a request for ex parte reexamination	
112	920*	112 920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 Extension for reply within first month	
116	390	216 Extension for reply within second month	
117	890	217 Extension for reply within third month	
118	1,390	218 Extension for reply within fourth month	
128	1,890	228 Extension for reply within fifth month	
119	310	219 Notice of Appeal	
120	310	220 Filing a brief in support of an appeal	
121	270	221 Request for oral hearing	
138	1,510	138 Petition to institute a public use proceeding	
140	110	240 Petition to revive - unavoidable	
141	1,240	241 Petition to revive - unintentional	
142	1,240	242 Utility issue fee (or reissue)	
143	440	243 Design issue fee	
144	600	244 Plant issue fee	
122	130	122 Petitions to the Commissioner	
123	50	123 Petitions related to provisional applications	
126	240	126 Submission of Information Disclosure Stmt	
581	40	581 Recording each patent assignment per property (times number of properties)	40.00
146	710	246 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249 355 For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279 Request for Continued Examination (RCE)	
169	900	169 Request for expedited examination of a design application	
Other fee (specify) _____			

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00)

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101	710	201 Utility filing fee	710
106	320	206 Design filing fee	
107	490	207 Plant filing fee	
108	710	208 Reissue filing fee	
114	150	214 Provisional filing fee	

SUBTOTAL (1) (\$ 710.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20	-20** = 0	X	= 0
Independent Claims 3	- 3*** = 0	X	= 0
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	80	202 40 Independent claims in excess of 3
104	270	204 135 Multiple dependent claim, if not paid
109	80	209 40 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ -0-

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	JON E. HOKANSON	Registration No. (Attorney/Agent)	30,069	Telephone	310-209-4499
Signature	<i>Jon E. Hokanson</i>			Date	12-7-02

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